FILED FEB 26 1949 STANDARD CERTIFICATE OF DEATH REG. 01ST. NO. 149 PRIMARY REG. D1ST. NO. 1002 Registrary: No. 50 I.P. LACE OF DEATH a. COUNTY Jackson D. CITY (If outside corporate limits, write RURAL and give for RY (If the Law Server) of RY (If the R	1		THE DIVISION OF HE					49	1
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STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the r	everse side of this certific	cate was embalmed by me, or b	У—————
	, Stu	dent Embelmer No	
working under my personal supervision.			

Student Embalmer

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Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.